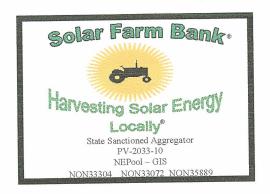
% PUC 12FEB'14A411:08



February 7, 2014

Ms. Debra Howland Executive Director and Secretary State of New Hampshire Public Utilities Commission 21 S. Fruit Street Suite 10 Concord, NH 03301-2429

Ms. Howland,

Solar Farm Bank LLC (SFB) New Hampshire Certification Code NH-II-13-O10 requests the New Hampshire Public Utilities Commission (Commission) grant its approval and certification of our account for Class II REC for the photovoltaic array of:

Jon Marquis 3 Andrea Lane Pelham, NH 03076 Telephone # 603-635-7313 Email: JMarquis@NEFinish.com

In Support of the request for Class II eligibility for the Jon Marquis, SFB submits an original and two copies of the completed application, required documentation and supplemental supporting information.

Thank you for your consideration of SFB's request. If you have any questions or need additional information, please contact me directly.

Stephen Hirsh,

President

Solar Farm Bank LLC. 508-259-2419
Mailing address: P O Box 24 Medway, MA 02053
Office address: 205 Shaw Farm Rd Holliston, MA 01746
Solarfarmbank@gmail.com



## State of New Hampshire Public Utilities Commission



21 S. Fruit Street, Suite 10, Concord, NH 03301-2429

### **DRAFT APPLICATION FORM FOR**

### RENEWABLE ENERGY SOURCE ELIGIBILITY FOR CLASS I AND CLASS II

#### Sources with a Capacity of 100 Kilowatts or Less

Pursuant to New Hampshire Administrative Code Puc 2500 Rules including Puc 2505.08, Certification of Certain Customer-Sited Sources

Please submit one (1) original and two (2) paper copies of the completed application and cover letter\* to:

 Debra A. Howland
 Executive Director

 New Hampshire Public Utilities Commission
 21 South Fruit Street, Suite 10

Concord, NH 03301-2429

- Send an electronic version of the completed application and the cover letter electronically to executive.director@puc.nh.gov.
- \* The cover letter must include complete contact information and identify the renewable energy class for which the applicant seeks eligibility. Pursuant to Puc 2505.01, the Commission is required to render a decision on an application within 45 days of receiving a completed application.

If you have any questions please contact Barbara Bernstein at (603) 271-6011 or Barbara.Bernstein@puc.nh.gov.

Eligibility Requested for: Class I	Class II x				
Is this facility part of an aggregation? YES NO NO If the facility is part of an aggregation, please list the aggregator's name:					
Applicant Name: Jon Marquis					
Mailing Address: 3 Andrea Lane					
Town/City: Pelham	State: NH Zip Code: 03076				
Primary Contact: Jon					
Telephone: 603-635-7313	Cell: 617-594-3690				
Email address: JMarquis@NEFinish.com					

The fac	ility name a	and contact information (if di	fferent than appl	icant contac	t information).	
Facility	Name:	Jon Marquis				
Mailing	Address:	827 Davis Hill Road (Ph	nysical address of	solar array)		
Town/C	City: Con	way	State:	NH	Zip Code:	03813
Primary	Contact:				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Telepho	one:		Cell:			
Email a	ddress:					
Provide inverte	•	te list of the equipment used	at the facility, in	cluding the n	neter, and, if a	pplicable, the
quantity			quantity			
45	OPT265- panels	60-4-100 Suniva 265W				
2	PVI-6000 6000W II	-OUTD-US PowerOne nverter				
1		ntron Solid State Digital S 30TA 1.0KH ANSI12				
What is	the name	plate capacity of your facility	? 7.95KW			
12/20/1 This infor	13 mation is typ	ial date of operation?				
		, license number and contact stalled directly by the custom		ne installer, (	or indicate tha	t the
Installe	r Name:	Frase Electric LLC				
Installe	r Address:	789 Whittier Highway				
License	#: 4146	SM .				
Town/C	City: Sou	th Tamworth	State:	NH	Zip Code:	03883
Telepho	one: 603	-284-6618	Cell:60	3-387-0873		
Email a	ddress: k	drase@hughes.net				

If the equipn	nent was installed directly by th	ne customer, please check here:	
Provide the I	name and contact information	of the equipment vendor:	
	heck here if the installer and th	ne equipment vendor were one	and the same.
Business Nar	ne: Same as above		
Vendor's Na	me:		
Business Add	dress:		
Town/City:		State:	Zip Code:
Telephone:		Cell:	
Email addres	s:		
If an indeper Electrician's Business Nar Business Ado	Name: Same as above ne:	ase provide the following inform	nation:
Town/City:		State:	Zip Code:
License #			
(A <u>list</u> of inde http://www.	name and contact information	ergy/Renewable Energy Source	
Town/City:	Manchester ————	State: NH	Zip Code: 03104
Telephone:			
	603-617-2469	Cell: 603-836-4403	2

Provide documentation of the applicable distribution utility's approval of the installation (This is usually included in the interconnection agreement.) If this documentation is separate from the interconnection document, please provide this as **Attachment B**.

Is the facility certified under another state's renewable portfolio standard? yes no _x If "yes", then provide proof of the certification as <b>Attachment C.</b>					
In order to qualify your facility's electrical production for Renewable Energy Certificates (RECs), you must register with the NEPOOL – GIS. Contact information for the GIS administrator follows:					
James Webb					
Registry Administrator, APX Environmental Markets  224 Airport Parkway, Suite 600, San Jose, CA 95110  Office: 408.517.2174					
jwebb@apx.com					
Mr. Webb will assist you in obtaining a GIS facility code and, if applicable, an ISO-New England asset ID number. Please note, if your facility is part of an aggregation, your aggregator should provide you with this information.					
GIS Facility Code # NON 35889 Asset ID #					
Complete an affidavit by the applicant or qualified installer that the project is installed and operating in conformance with any applicable state/local building codes. Use either the following affidavit form or provide a separate document as <b>Attachment D</b> .  The Commission requires a notarized affidavit as part of the application.					
AFFIDAVIT					
The Undersigned applicant declares under penalty of perjury that the project is installed and operating in conformance with all applicable building codes.  Applicant's Signature Date 1/27/19					
Applicant's Printed Name Jon P. Marguis					
Subscribed and sworn before me this Day of (month) in the year					
County of Rockeyhan State of New Hampshire  Notary Public Pustice of the Peace					
My Commission Expires  Notary Public - New Hampshire  My Commission Expires March 28, 2017					

CHECK LIST: The following has been included to complete the application:	YES
All contact information requested in the application.	Х
A copy of the interconnection agreement, nameplate capacity and date of operation	X
(Attachment A.)	
• Documentation of the distribution utility's approval of the installation.* (Attachment B.)	X
<ul> <li>If the facility is participating in another state's renewable portfolio standard (RPS)</li> </ul>	Χ
program, documentation of certification in other state's RPS. (Attachment C).	
• A signed and notarized attestation or <b>Attachment D</b> .	X
A GIS number has been obtained.	Χ
The distribution utility's approval of the installation.*	X
The document has been printed and notarized.	X
<ul> <li>The original and 2 copies are included in the packet mailed to Debra Howland,</li> </ul>	X
Executive Director of the PUC.	
An electronic version of the completed application has been sent to	Х
executive.director@puc.nh.gov .	
*I loughly included in the interconnection agreement. If the interconnection agreement contri	inc this

<sup>\*</sup>Usually included in the interconnection agreement. If the interconnection agreement contains this information, attachment B is not necessary.

## PREPARER'S INFORMATION

Preparer's Na	me:	Solar Farm Bank LLC/ Stephen Hirsch				
Mailing Addre	ess:	205 Shaw Farm Road				
Town/City:	Hollist	on	State:	MA	Zip Code:	01746
Telephone:	508-89	93-8993 FAX 508-893-8991	Cell: 508	-259-2419		
Email address: Solarfarmbank@gmail.com or solarfarmbank@verizon.net						
Preparer's Signature:						
,		- tell		~		7

POTENTIAL UPYRADER TO PSNA FALLITIES. AW. 981. 14 system modifications, if raddined (Are system modifications required? Yes No V To be Determined

Company Signature: M. Company Signa Installation of the Facility is approved contingent upon the terms and conditions of this Agreement, and agreement to any Approval to Install Facility (For Company use only) t fease anach any decunientation provided by the inverter manufacturer describing the inverter's UL 1941. Ilstud Customer Signature: Tille: Orm ef Terms and Conditions on the following page: I hereby certify that to the open of my knowledge, all of the information provided in this application is true and I agree to the Estimated In-Service Date 12/24/2 Estimated Install Date /2/24/72 External Manual Discounces Yes) VUL 1741.1 (TEEE 1547.1) KEROUPYCE INO Epergy Source: Solar 🗖 Wind 🗌 Hydro 🗌 Diesel 🗋 Matural Gas 🗍 Fuel Oil 📗 Other Photovoltaic & Reciprocating Engine | Fuel Cell | Turbine | Other, Prime Mover: If Remembly Fueled, will the account be Net Meterret? Yes Met Metering: System Design Capacity: 12 (kVA) 12 (kVA) Battery Backup: Yes SU-MSTEXOS Single V or Three Nameplate Rating: // (KW) /2 (KVA) /( (AC Volts) Senerator/Inverter Manufacturer & Pocscone Model Name and Number: Pvi 6000 06/12 Quantity: Account Number: Electricity Supply Company: Account Number: State: UPF Zip Code: Electric Service Company: 184925065 Zip Code: 03813 monuo - الحالمية The Lane 15 The Phil 16.8. Y Address of Facility: 

✓ Facility Information: Zip Code: siens: ິ :Aແງ √szembb∧ gaifisM Telephone: Same as about Electrical Contractor Contact Information (if appropriate): E-Mail Address: KARSE @ Mud hes, net Fuczimile Number: 284 - 6343 (Evening): &197-12C Telephone (Daytime): LOB 284 - Lola 8 <u>- ''S</u> ZIP Code: D3883 :apers HM Athammal Seambly guillely. my byling bec 777 754%月350年 Alternative Contact Information (e.g., system installation contractor or coordinating company, if appropriate): E-Mail Address JAKRADIS EN E FILISUI COM Facsimile Number: Telephone (Daytime): 6157 - 259 (Evening): 603 - 750 (Evening) JLOFO SPOJ diz CIR: KETHEW S AHOREA CAHE Asiling Address: Contact Person, if Company:\_

Date Prepared:

Simplified Process Interconnection Application and Service Agreement Simplified Process Interconnection Application Appl

EYLI121

L JAN O & 2014

BX:

Affre house A H

Customer or Company Name (print): 10th MAZQUIS

Contact Information:

Legal Name and Address of Interconnecting Customer (or, Company name, if appropriate)

Attachent 12

# PUBLIC SERVICE COMPANY OF NEW HAMPSHIRE INTERCONNECTION STANDARDS FOR INVERTERS SIZED UP TO 100 KVA

## **Terms and Conditions for Simplified Process Interconnections**

PSNH waives inspection/Witness Test: Yes $ {f X} $	N	o 🗌	Date of inspection/Witness Test: _	Witness Test Waived
--	---	-----	------------------------------------	---------------------

- 1. **Construction of the Facility**. The Interconnecting Customer may proceed to construct the Facility in compliance with the specifications of its Application once the Approval to Install the Facility has been signed by the Company.
- 2. **Interconnection** and operation. The Interconnecting Customer may operate Facility and interconnect with the Company's system once the all of the following has occurred:
  - 2.1. **Municipal Inspection**. Upon completing construction, the Interconnecting Customer will cause the Facility to be inspected or otherwise certified by the local electrical wiring inspector with jurisdiction.
  - 2.2. Certificate of Completion. The Interconnecting Customer returns the Certificate of Completion to the Agreement to the Company at address noted.
  - 2.3. Company has completed or waived the right to inspection.
- 3. Company Right of Inspection. The Company will make every attempt within ten (10) business days after receipt of the Certificate of Completion, and upon reasonable notice and at a mutually convenient time, conduct an inspection of the Facility to ensure that all equipment has been appropriately installed and that all electrical connections have been made in accordance with the Interconnection Standard. The Company has the right to disconnect the Facility in the event of improper installation or failure to return Certificate of Completion. All projects larger than 10 kVA will be witness tested, unless waived by the Company.
- 4. Safe Operations and Maintenance. The Interconnecting Customer shall be fully responsible to operate, maintain, and repair the Facility.
- 5. Disconnection. The Company may temporarily disconnect the Facility to facilitate planned or emergency Company work.
- 6. Metering and Billing. All renewable Facilities approved under this Agreement that qualify for net metering, as approved by the Commission from time to time, and the following is necessary to implement the net metering provisions:
  - 6.1. Interconnecting Customer Provides: The Interconnecting Customer shall furnish and install, if not already in place, the necessary meter socket and wiring in accordance with accepted electrical standards. In some cases the Interconnecting Customer may be required to install a separate telephone line.
  - 6.2. Company Installs Meter. The Company will make every attempt to furnish and install a meter capable of net metering within ten (10) business days after receipt of the Certificate of Completion if inspection is waived, or within 10 business days after the inspection is completed, if such meter is not already in place.
- 7. Indemnification. Interconnecting Customer and Company shall each indemnify. defend and hold the other, its directors, officers, employees and agents (including, but not limited to, Affiliates and contractors and their employees), harmless from and against all liabilities, damages, losses, penalties, claims, demands, suits and proceedings of any nature whatsoever for personal injury (including death) or property damages to unaffiliated third parties that arise out of, or are in any manner connected with, the performance of this Agreement by that party, except to the extent that such injury or damages to unaffiliated third parties may be attributable to the negligence or willful misconduct of the party seeking indemnification.
- 8. Limitation of Liability. Each party's liability to the other party for any loss, cost, claim, injury, liability, or expense, including reasonable attorney's fees, relating to or arising from any act or omission in its performance of this Agreement, shall be limited to the amount of direct damage actually incurred. In no event shall either party be liable to the other party for any indirect, incidental, special, consequential, or punitive damages of any kind whatsoever.
- 9. Termination. This Agreement may be terminated under the following conditions:
  - 9.1. By Mutual Agreement. The Parties agree in writing to terminate the Agreement.
  - 9.2. By Interconnecting Customer. The Interconnecting Customer may terminate this Agreement by providing written notice to Company.
  - 9.3. By Company. The Company may terminate this Agreement (1) if the Facility fails to operate for any consecutive 12 month period, or (2) in the event that the Facility impairs or, in the good faith judgment of the Company. may imminently impair the operation of the electric distribution system or service to other customers or materially impairs the local circuit and the Interconnecting Customer does not cure the impairment.
- 10. Assignment/Transfer of Ownership of the Facility. This Agreement shall survive the transfer of ownership of the Facility to a new owner when the new owner agrees in writing to comply with the terms of this Agreement and so notifies the Company.
- 11. Interconnection Standard. These Terms and Conditions are pursuant to the Company's "Interconnection Standards for Inverters Sized Up to 100 kVA" for the Interconnection of Customer-Owned Generating Facilities, as approved by the Commission and as the same may be amended from time to time ("Interconnection Standard"). All defined terms set forth in these Terms and Conditions are as defined in the Interconnection Standard (see Company's website for the complete document).

Aftachunt B

## PUBLIC SERVICE COMPANY OF NEW HAMPSHIRE INTERCONNECTION STANDARDS FOR INVERTERS SIZED UP TO 100 KVA (Continued)



Exhibit B - Certificate of Completion for Simplified Process Interconnections

Installation Information:	☐ Check if owner-installed
Customer or Company Name (print): しゅん	MARquis.
Contact Person, if Company:	
Mailing Address: 3 ANDREA LI	AUR
City: Peluan	State: NH Zip Code: 03076
Telephone (Daytime): 617 -594 -3690	(Evening): 603 - 635 - 7313
Facsimile Number:	(Evening): 603 - 635 - 7313  E-Mail Address: JMARQUISE HUISH COM
·	
Address of Facility (if different from above):	827 Davis Hill Road
City: CON WAY	State: N.1.1 Zip Code: 03813.  VI-6010-0410 Contact Person: Kimchas = -
Generation Vendor: (2) Paus one - Augo	VI-660-cuto Contact Person: Kimcacs = _
I herby certify that the system hardware is in comp	oliance with Puc 900.
1,1	
Vendor Signature:	Date: (12/20/13)
Electrical Contractor's Name (if appropriate):	rase Electric LLC
Mailing Address: 789 Whither	Huy
city: <u>So. Tamworth</u>	State: NH Zip Code: 03883
Telephone (Daytime): 284-6618	(Evening): <u>284-6618</u> E-Mail Address: <u>Kfasee hughes, net</u>
	E-Mail Address: <u>Grase@ hug hes. Net</u>
License number: 446	·········
Date of approval to install Facility granted by the C	Company: Installation Date:
Application ID number:	
Inspection:	
The system has been installed and inspected in con	mpliance with the local Building/Electrical Code of
N	Α
(City/County)	
Signed (Local Electrical Wiring Inspector, or attack	ch signed electrical inspection):
Signed (Libeat Literation Viginity improved, or assert	V. C.
Name (printed):	Kinfass /
Date: 12/36/13	
Customer Certification:	
I hereby certify that, to the best of my knowledge,	all the information contained in this Interconnection Notice is true and
correct. This system has been installed and shall b initial start up test required by Pup 905.04 has been	be operated in compliance with applicable electrical standards. Also, the
	is successively completed.
Customer Signature: M 1 5	Dayle: 12/17/13



Attachment B

L.L.C.

Kim Frase – NH Lic #4146
Phone –603- 284-6618
Fax – 603-284-6343
789 Whittier Highway
South Tamworth, N.H. 03883
Email – kfrase@hughes.net

DATE: DECEMBER 20,2013

JOB NAME: JON MARQUIS

FRASE ELECTRIC LLC HAS INSPECTED THE PV INSTALLATION AT 827 DAVIS HILL ROAD, CONWAY, NEW HAMPSHIRE.

TO THE BEST OF MY KNOWLEDGE IT HAS BEEN INSTALLED TO MEET ALL STATE AND FEDERAL ELECTRIC CODES AS WELL AS POWER COMPANY REQUIREMENTS.

SINCERELY,

KIM FRASE